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Substitute for form 1449A/PTO				<b>Complete If Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(use as many sheets as necessary)</i>				Application Number	
				Filing Date	
				First Named Inventor	
				Group Art Unit	
				Examiner Name	
Sheet	1	of	1	Attorney Docket Number	AFD552

U.S. PATENT DOCUMENTS						
Examiner Initials*	Cite No.*	U.S. Patent Document		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number	Kind Code (if known)			
		6,037,066		Kuwabara	03-14-2000	
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FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No.*	U.S. Patent Document			Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T
		Office	Number	Kind Code (if known)				

OTHER DOCUMENTS (Including Author, Title, Date, Pages, etc.)			

Examiner Signature		Date Considered	9/7/05
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